09 (288010)

PTO/SB/06 (08-03)
Approved for use through 7/31/2006, OMB 6651-0032
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PATENT APPLICATION FEE DETERMINATION RECORD **Application or Docket Number** Substitute for Form PTO-875 **CLAIMS AS FILED - PART I** OTHER THAN OR SMALL ENTITY SMALL ENTITY (Column 1) (Cotumn 2) NUMBER FILED FOR NUMBER EXTRA RATE FEĘ RATE FEE (37 CFR 1.16(a)) OR TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 = X S OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 a X S OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR = " If the difference in column 1 is less than zero, enter "O" in column 2. TOTAL OR TOTAL **CLAIMS AS AMENDED - PART II** OTHER THAN OR (Column 1) (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY HIGHES1 PRESENT REMAINING NUMBER RATE ADDL RATE EXTRA TIONAL **AFTER** PREVIOUSLY TIONAL AMENDMENT PAID FOR FEE FEE Total (37 CFR 1.16(c)) Minus AMENDM X S OR X S Independent (37 CFR 1.16(b)) X S OR X S FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) + 5 OR TOTAL TOTAL 11-2305 ADD'L FEE OR ADD'L FEE (Column 1) (Column 3) (Column 2) CLAIMS HIGHEST $\mathbf{\omega}$ REMAINING PRESENT NUMBER RATE ADDI-TIONAL RATE PREVIOUSLY **AFTER** TIONAL AMENDMENT PAID FOR FEE. FEE Total (37 CFR 1.15(c)) Minus ENDM ₹८ / X S OR (37 CFR 1.15(b)) Minus X S OR X S = FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d)) OR TOTAL ADD'L FEE CR ADD'L FEE (Column 1) (Column 2) (Catumn 3) HIGHEST CLAIMS REMAINING PRESENT ADDI-TIONAL ADDI-TIONAL NUMBER RATE RATE EXTRA **AMENDMENT** AFTER PREVIOUSLY AMENDMENT PAID FOR FEE FEE Total Minus (37 CFR 1.18(c)) X 1 OR X S Independent (37 CFR 1.18(b)) Minus = X S . OR X S FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d)) OR TOTAL TOTA ADO'L FEE OR ADD'L FEE If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The "Fighest Number Previously Paid For" In THIS SPACE is less than 3, enter "3".

The "Fighest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.18. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form ant/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000												
CLAIMS AS FILED - PART I (Column 1) (Column 2)							-	SMALL E	NTITY	OR	OTHER SMALL	
TOTAL CLAIMS							1	RATE	FEE	1.1	RATE	FEE
FO	R		NUMBER FILED NUM			ER EXTRA	BASIC		355.00	OR	Basic Fee	710.00
то	TAL CHARGEA	BLE CLAIMS	45 min	us 20=	• '2	'5.2		X\$ 9=		OR	X\$18=	450)
IND	EPENDENT CL	AIMS	minus 3 =			×		X40=		OR	X80=	1/20
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT				+135=			OR	+270=	
• If	* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	157:
CLAIMS AS AMENDED - PART II OTHER THAN											THAN	
	(Column 1) (Column 2) (Column 3)					(Column 3)		SMALL		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT				PRESENT EXTRA	ı	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 45	Minus	•• (15	= /	I	X\$ 9=		OR	X\$18=	
	Independent	. 5	Minus	***	5	٥	Ī	X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					İ	+135=		OR	+270=		
							·	TOTAL	•	00	TOTAL ADDIT, FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)		ADDIT. FEE			AUUII. PEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	EST BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	- 38	Minus	٠٠ کے	15	= /	I	X\$ 9=		OR	X\$18=	
	Independent	. 4	Minus	•••	5		ı	X40=		ÓR	X80=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	ENDEN	T CLAIM		Ì	+135=		OR	+270=	
	1260	W					,	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	1009	(Column 1)			mn 2)	(Column 3)	_			_		No. 1 week
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 38	Minus	4	5	•		X\$ 9=		OR	X\$18=	
	Independent	. 4	Minus	•••	5	=	t	X40=		OR	X80=	
		NTATION OF M					ŀ	+135=		OR	+270=	
"If the entry in column 1 is less than the entry in column 2, write "V" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "3." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

Application or Docket Number

PATENT APPLICATIO	RD		09	(QS	82801	Ö					
CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN (Column 1) (Column 2) TYPE CO OR SMALL ENTITY											
TOTAL CLAIMS					TE	FEE		RATE	FEE		
FOR	NUMBER FILED	NUMBER EXTRA		BAG	C FEE	355.00	OR	Basic Fee	710.00		
TOTAL CHARGEABLE CLAIMS	Li minus 20=	. ,	. '2?		9-		OR	X\$18=	451)		
INDEPENDENT CLAIMS	S minus 3 =	. 3	2		0=		OR	X80=	1100		
MULTIPLE DEPENDENT CLAIM P	RESENT			11	15=		OR	+270=			
* If the difference in column 1 is	less than zero, ente	10	TAL		OR	TOTAL	1320				
CLAIMS AS A					OTHER						
(Column 1)	(Colu		(Column 3)	SM	ALL	ENTITY	OR	SMALL			
< REMAINING	MUM PREVI	BER	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
Total - US	Minus (15	- /	XS	9-	•	OR	X\$18-			
	Minus	5	•	X4	0=		OR	X80=			
FIRST PRESENTATION OF M	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						OR	+270=			
					OIAL		OR	TOTAL ADDIT, FEE			
(Column 1)	(Colu	mn 2)	(Column 3)	ADDIT	. PEE		,	AUGH, PEE			
CLAIRS REMAINING AFTER AMENDMENT	PREVI	EST BER OUSLY FOR	PRESENT EXTRA	. RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Minus 2	15	• /	XS	-		OR	X\$18=			
Total Independent	Minus	5	•	X4	0		ÓR	X80=			
Trinoi ricoccinica or m	+13	15-		OR	+270=						
126004				ADOIT	OVAL FEE		OR	TOTAL ADDIT, FEE			
(Column 1)			(Column 3)			•			j		
CLAMS REMARKING AFTER AMENDMENT	NUM PREVI	BER OUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
Total Section of the	Minus 4	5		, X3	9 =		OR	X\$18=			
Independent · · ·	Minus	5	•	X4	O=		QR	X80=			
PHST PRESENTATION OF M	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						OR	+270=			
* If the entry in column 1 is less than the entry in column 2, with "O" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20.* ** The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "2.* The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.											

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